## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

indicated ur less correcte maintenance tee notifica	ed below or directed oth	nerwise in Block 1, by (	a) specifying a new corre	espondence address;	and/o	(b) indicating a separ	correspondence address as rate "FEE ADDRESS" for
CURRENT CORRESPOND	No Fee pag hav	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
Milton S. Sales Patent Legal Sta Eastman Kodak	Sta ado	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
343 State Street Rochester, NY 14650-2201				(Depositor's name)			
							(Signature)
							(Date)
APPLICATION NO. FILING DATE			FIRST NAMED INVENTO		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/633.777 08/04/2003		Todd D. Benham		86316NAB DOCUMENT		6908	
APPLN TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0		\$1740	01/03/2008
EXAMINER		ART UNIT	CLASS-SUBCLASS	5			
S/J AIPOUR, HOUSHANG		2625	358-488000	J			
Address to in PTO/SE  "Fee Address" indi PTO/SB/47; Rev 03-0 Number is required.  3. ASSIGNEE NAME A	ication (or "Fee Address' 2 or more recent) attach  ND RESIDENCE DATA	2 registered patent attoristed, no name will be THE PATENT (print or ty	f a single firm (having as a member a mey or agent) and the names of up to tent attorneys or agents. If no name is will be printed.  and the name of up to tent attorneys or agents. If no name is a member a memb				
(A) NAME OF ASSIC 343 STATE S	STREET, ROCHE  A assignee category of	STER, NY 14680-	(B) RESIDENCE: (CITY	Individual	rporati	on or other private grou	up entity Government
	o small entity discount p	<ul> <li>b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).</li> </ul>					
	us (from status indicated		_	,			
NOTE: The Issue Fee and	S SMALL ENTITY statuder of Publication Fee (if requestroods of the United States)		b. Applicant is no lond from anyone other than to Office.				
Authorize I Signature		a.Mora		Date Do	مص	mber 21	D, 20007
Typed or printed name	A Downt	· Morceris				53,324	-
This collection of information application. Confident ubmitting the completed	ation is required by 37 Cliality is governed by 35 application form to the	FR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will vary	on is required to obtain or 1.14. This collection is es	retain a benefit by th	e publi	ic which is to file (and	by the USPTO to process) gathering, preparing, and e you require to complete

this form anc/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, A exandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.